MDR: M4-04-1094-01

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on September 19, 2003.

I. DISPUTE

Whether there should be reimbursement for out-of-pocket expenses for prescription medication for dates of service July 19, 2003 and August 18, 2003.

II. RATIONALE

EOB's were not submitted by either party; therefore, this dispute will be reviewed as a general fee dispute.

Although in the response to this dispute, filed by the respondent, states in part that ... "the current complaint of radiculopathy is not related to the original injury"; the respondent has not filed a TWCC-21 denying the extent or relatedness to the original injury.

• Neurontin 300 mg – date of service 7/19/03 through 8/18/03 - The requestor submitted a letter from the treating doctor supporting the use of the prescribed medication and receipts showing requestor has paid for this medication. Per the Texas Workers Compensations Commission Act 401.011(19)(E) and (31)(A) reimbursement in the amount of \$97.08 is recommended.

IV. DECISION & ORDER

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor is entitled to reimbursement for out-of-pocket expenses for prescription medication in the amount of \$97.08. Pursuant to Sections 402.042, 413.016, 413.031, and 413.019 the Division hereby ORDERS the Respondent to remit **\$97.08** to the Requestor within 20 days receipt of this Order.

The above Findings, Decision and Order are hereby issued this 30th day of December 2003.

Marguerite Foster Medical Dispute Resolution Officer Medical Review Division

MF/mf